See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Trixic Substances Control Division Sacramento, California

	4		anifest ument No.	2. Page 1 of		ion in the shaded areas quired by Federal law.		
	TOTAL DE	3. Generator's Name and Mailing Address A. State I				e Manifest Document Number		
		PARA PLATE 15910 SHOEMAKER AVE, CERRITOS, CA 90703	88631/56 B. State Generator's ID					
	- Canada	4. Generator's Phone (213) 404-3434						
9	77	5. Transporter 1 Company Name 6. US EPA ID Number	C. State Trans	C. State Transporter's in 100 23				
-75		OMEGA RECOVERY SERVICES CAD 042 245 001 D. Transporter's Phone				13' 698-0991		
-852	Name of the last	7. Transporter 2 Company Name B. US EPA ID Number E. State Transporter's ID F. Transporter's Phone						
800		9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's 17				The second secon		
88681 756 center 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550	all land	OMEGA REOCVERY SERVICES CAO 045				245001		
CAL		12504 E. WHITTIER BLVD						
چٍک	Receive	WHITTIER, CA 90602 CAD 042 245 001 213 698-0991						
Sec.	Register	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont		Total Quantity	14. I. Unit Waste No.		
4 1	and a		No.	Туре		Stat211,212		
∞_{Ω}^{2}		B. WASTE FLEXOSOLVENT, ORM-A N.O.S NA 1693						
の置	E		OKK	PMao	180	€ FOOT FOO3		
CO≥	N E	b.	100		•	State		
3802	A					EPA/Other		
24-8	OR		+			State		
8		C.				EPA/Other		
4.	1	Y.			டப்			
띮		d.				State		
ËN			 	 . .		EPA/Other		
) K	100	J. Additional Descriptions for Materials Listed Above		K. Handling	odes for W	astes Listed Above		
Ö	100	A) FOR RECYCLE		a. (2)	1	b .		
RESPONSE				C.	<u> </u>	d.		
	100000							
THE NATIONAL	5,000	15. Special Handling Instructions and Additional Information						
NAT	3500	PROFILE NUMBER B 10016						
뽀	l s	FROITING HOUSEN & SOCIE						
	- Tables							
CALL		16.	by proper shipping name					
SPILL,	102	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proposed and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable						
		national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the de						
K		to be economically practicable and that I have selected the practicable and quantity	ort to minimize my waste					
EMERGENCY	9	generation and select the best waste management method that is discourse.	can anoro.			Month Day Year		
3GE		Printed Typed Name	1 4	Comme	1	18121/1291/		
ME	T	17. Transporter 1 Acknowledgement of Receipt of Materials		1		and the same of th		
AN		Printerd/Typed Name Signature	1/2	11		Month Day Year		
OF A		18. Transporter 2 Acknowledgement of Receipt of Materials				0121/15791/		
	0					Month Day Year		
CASE	RTE	Printed/Typed Name Signature				1 1 1 1 1 1		
2								
	-	19. Discrepancy Indication Space				,		
	FA							
	C							
	L	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.				Month Day Yea		
	Y	Printed/Typed Name Signature	1	22		12/3/21		
		John HATE 2 A (1/88) Do Not Write Below This I	ine	S		The same of the sa		
DH	45 802	2 A (1/88) Do Not Write below fills t						

DHS 8022 A (1/88)

EPA 8700—22 (Rev. 9-88) Previous editions are obsolete

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White TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To: P.O. Box 3000, Sacramento, CA 95812